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LANGUAGE LEARNING STRATEGIES IN ENGLISH SPEAKING SKILLS: GAINING THE PERSPECTIVE OF NURSING STUDENTS

Fatimah Layba Ibrahim¹, Heni Nurhaeni², Audi Yundayani³, Fiki Alghadari⁴

^{1,2}Poltekkes Jakarta I ^{3,4}STKIP Kusuma Negara

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Correspondence:

Fatimah Layba Ibrahim Poltekkes Jakarta I

Email: fatimahlayba@gmail.com

ABSTRACT

Abstract: The use of English in medical contexts is rising globally. The English for nursing purposes assists students meet the requirement by addressing their needs in the context of nursing, particularly their speaking abilities. However, the shift from offline to online learning has an effect on nursing students' opportunity to practice their English-speaking skills. This study attempts to identify the language learning strategies (LLS) that nursing students employ to improve their speaking abilities for vocational objectives. Forty nursing students from an Indonesian nursing academy were the study's respondents. A questionnaire was used to obtain the data. This study found that (1) in the memory LLS, 92.5 percent of students tend to translate Indonesian sentences into English and produce them orally. In addition, they attempt to recall new English terms by pronouncing them; (2) in the cognitive LLS, 95% of them prefer to practice speaking in front of the mirror; (3) in the compensation LLS, 92.5% of them practice catching the other speaker's main point; (4) in the metacognitive LLS, 95% of them correct their mistakes on their own; (5) in the affective LLS, 95% of them encourage themselves to speak; and (6) in the social LLS, 92.5% of the students practice asking the other speaker to clarify what. According to the findings of the study, nursing students demonstrate an appropriate use of LLS, which results in their English acquisition.

INTRODUCTION

The Covid-19 outbreak impacted learning activities over the past two years. It forced the country to keep processing all online learning activities, including English. Teachers have helped students practice speaking in front of others using essential words before moving on to more complicated ones. Learning English through online instruction seems difficult since students must indirectly practice speaking without face-to-face interaction. As one of the learning outcomes to support the learning goal, students should define the process and provide an informal process presentation. Teachers and students use online tools to interact electronically during learning objectives (Jena, 2019).

Moreover, learning to speak English online reduced anxiety and increased confidence compared to in-person instruction (Yaniafari, 2021). It describes that online learning involves modifying the learner's profile and learning environment and using platforms or learning media

services from face-to-face to online learning. English for nursing purposes (ENP) facilitates vocational students to deal with English as a communication tool in nursing contexts.

The nursing profession has always found the medical context helpful, and English is increasingly used worldwide in medical settings. For nursing students, having good English skills is essential, not merely something they should have to fit in. Nursing students need to have a firm grasp on their speaking talents, and there is a lot of English terminology in this medical sector that they must comprehend and retain. When learning a language, a person could automatically pick up the language they hear daily. Humans can imitate others, which is why it happens. However, a person's capacity for acquiring language depends on the community in which they live. (Nguyen, 2017)

The use of English in medical contexts is rising globally. English for nursing purposes assists students in meeting the requirement by addressing their needs in the context of nursing, particularly their speaking abilities. However, the shift from offline to online learning affects nursing students' opportunities to practice their English-speaking skills. A preliminary study found that nursing students had difficulties adjusting to the English learning process since they should be able to adapt to the shifting learning mode. It becomes worse when dealing with English speaking practice since usually, the classroom activity facilitates them to practice speaking through various activities. They should adapt their English learning, especially in speaking practice, through their language learning strategies. (Hewitt, 2008)

A strategy is a thorough plan for achieving success in situations like war, politics, business, industry, or sport, or the skill of planning for such scenarios. Learning is the action of acquiring knowledge. A learning strategy is a set of particular steps done by the student to make learning more straightforward, quicker, more fun, more self-directed, more efficient, and more adaptable to changing circumstances (Oxford, 1990). It was believed that someone learning a second or foreign language would begin with the habits they had developed in their native tongue and that these habits would interact with the new ones required for the second language. In other words, learning a second or foreign language was similar to acquiring a first language. According to an unorthodox approach, every child is born with a language acquisition device (LAD), which suggests that an innate understanding of universal grammar rules enables kids to learn languages for both their first and second or foreign languages (Dąbrowska, 2015).

The switch impacts nursing students from traditional to online schooling. As these young men call themselves "Language Buddy" say, learning to speak English requires much practice, but suddenly the opportunity to do so is dwindling because of the epidemic season. Thus, these nursing students are compelled to study English independently. Self-directed learning itself is an indication of a learner's capacity or aptitude for taking the initiative to organize their English classes and set their learning objectives (Min-hsun & Duo, 2010). The teacher must assist students in exercising self-directed learning. The language learning technique is the resource students use to practice self-directed learning (Min-hsun & Duo, 2010).

Nursing students use various language learning techniques to increase their language competence. Nursing students in an Indonesian nursing school are also experiencing this illness. Oxford (1990) categorizes language learning strategies into just six groups. These include social strategy, emotional strategy, metacognitive strategy, compensatory strategy, memory strategy, and social strategy. According to behaviorist theory, imitation, practice, reinforcement, and habit formation are all parts of the learning process. The audio-lingual method's presentation of behaviorism in the classroom emphasizes mimicry and memorization. Students memorize dialogues and sentence structures (Chen et al., 2016). Moreover, learning is a complicated idea and activity (Hewitt, 2008). Most teachers and students would understand the significance of the social, emotional, and cognitive aspects of learning, thinking, and problem-solving.

Language learning strategies are classified into two primary and indirect strategies (Oxford, 1990). Direct strategy deals with mastering a new language composed of remembering, retrieving, understanding, and producing the language. In short, the direct strategy consists of memory, cognition, and compensation. Memory strategies are the basic strategy of human learning, and it often been used at the elementary level from a thousand years ago. Memory strategy relates to remembering a new language. This strategy employs learners to visualize new words or phrases into images to help them remember a new language. It falls into four sets, (1) creating mental linkages through grouping, associating/ elaborating, and placing new words into a context; (2) applying images and sound through using imagery, semantic mapping, using keywords, representing sound in memory; (3) reviewing well through structured reviewing; (4) employing action by using physical response or sensation and using mechanical techniques.

The following direct strategy is cognitive strategy. This strategy helps learners take advantage of various learning resources by practicing, analyzing, and taking notes (Chamot & Kupper, 1989). This strategy falls into four following sets; (1) practicing through repeating, formally practicing with sound and writing systems, recognizing and using formulas and patterns, recombining, and practicing naturalistically; (2) receiving and sending messages by getting ideas quickly, using resources for receiving and sending messages; (3) analyzing and reasoning through reasoning deductively, analyze expressions, analyzing contrastively (across language), translating and transferring; (4) creating a structure for input and output through taking notes, summarizing and highlighting.

The last kind of direct strategy is the compensation strategy. When faced with unknown expressions, many learners may employ their minds by guessing intelligently. Even when learners are confronted with unknown expressions supposed to say, they may switch those expressions to their mother tongue. These actions relate to compensation strategy. The compensation strategy falls into two sets. The first is guessing intelligently by using linguistic clues using other clues. The second is overcoming limitations in speaking and writing by switching to the mother tongue, getting help, using mine or gestures, avoiding communication partially, selecting the topic, adjusting or approximating the message, and coining words. The direct language learning strategy performs as a director of a play. It is responsible for checking, correcting, coaching, and ensuring that the performance works cooperatively with other actors. In other words, the direct language learning strategy deals with the learners' cognition (Hewitt, 2008).

The indirect strategy involves coordinating learning, regulating emotions, and learning with others. Moreover, it consists of metacognitive, affective, and social strategies. Furthermore, the second primary class of language learning strategies is indirect strategy. The indirect strategy performs as performers of a play that relates to the learners' social environment (Nawa, 2018). It is divided into metacognitive, affective, and social strategies. First, metacognitive strategies allow the learners to control their cognition, that is, to coordinate the learning process and arrange, plan, and evaluate. It includes three strategy sets, (1) centering your learning through overviewing and linking with already known material, paying attention and delaying speech production to focus on listening; (2) arranging and planning your listening through finding out about language learning, organizing, setting goal and objectives, identifying the purpose of language task, planning for a language task and seeking practice opportunities; (3) evaluating your learning through self-monitoring and self-evaluating.

Second, effective strategies help to regulate emotions, attitudes, motivations, and values. The sets of affective strategies are (1) lowering your anxiety through using relaxation, using music, and using laughter; (2) encouraging yourself through making positive statements, taking risks wisely, and rewarding yourself; (3) taking your emotional temperature by listening to your body, using a checklist, writing a language learning diary and discussing your feeling with someone else. The last social strategies deal with learners' cooperation with other

learners, teachers, or proficient users of the new language. They fall into three sets of strategies that can be remembered by asking questions, cooperating with others, and empathizing with others (ACE). Asking questions can be asking for clarification or verification and asking for a correction. Moreover, cooperating with others is through cooperating with peers and proficient users of the new language. In addition, empathizing with others can be seen through developing cultural understanding and becoming aware of others' thoughts and feelings (Chen, 2013).

In conclusion, there are two categories of language learning techniques (direct and indirect). There was a total of 19 strategy sets created from those two strategies. The direct strategy serves as a director in learning, whereas the indirect strategy acts as an actor or performer. Based on the description, this study attempts to identify nursing students' language learning strategies (LLS) to improve their speaking abilities for vocational objectives. The novelty of the research is that no one has ever made a research about language learning strategy in medical field especially with nursing students.

METHOD

Research Design

This study makes an effort to pinpoint the language learning techniques (LLS) nursing students use to enhance their speaking skills for professional goals. Thus, a mixed method was used in this study by calculating the percentage of the selected response category. On the qualitative side, it was concluded based on the data from the interview results. The results of the interview analysis support the results of the percentage calculation. Because LLS is dynamic and complicated, a qualitative design was used because it is thought this method is more suitable for studying LLS (Nguyen & Terry, 2017). The qualitative technique was used to comprehend the LLS in further detail (Mukminin et al., 2018).

Participants

Forty nursing students took part in this study. The trainees were carefully selected from an Indonesian nursing academic program. They were chosen under the presumption that since they had been studying English from elementary school, they were aware and experienced with the methods and strategies for acquiring the language. It is a widespread belief that learners of English develop more methods the longer they study the language.

Instruments and Data Collections

A set of complete and valid data analyses was collected using two instruments; questionnaires and interviews. The type of questionnaire used is a closed questionnaire, where the answers choices were provided (Creswell, 2016). The research instruments were created using the proposed Strategy Inventory for Language Learning or SILL (Oxford, 1990; Amerstorfer, 2018). These consist of 30 items with six dimensions of strategy; memory, cognitive, compensation, metacognitive, affective, and social strategy. Moreover, the questionnaire was performed by a Likert scale ranging from strongly agree, agree, disagree, and strongly disagree. This point scale describes how often students use language-learning strategies to learn speaking ability during online learning. Moreover the interview script was developed by using the open ended question through the concept of SILL (Oxford, 1990).

RESULT AND DISCUSSION Result

This study aimed to investigate more about nursing students' speaking language learning strategies at an Indonesian nursing academic program in Jakarta. The survey questionnaire and interview data were used to derive the conclusion. Researchers began by looking up several questionnaire-related questions. Understanding the questionnaire from the perspective of the respondent aids nursing students.

Table 1 explains the demographic details of the respondents. 92.5% of those surveyed were female, and 7.5% were male. While 32.5% of respondents were first-year students and 67.5% were sophomores.

Table 1. Respondents' demographic information

Category	Frequency	Percentage		
Gender				
Female	37	92.5%		
Male	3	7.5%		
Level				
Freshman	13	32.5%		
Sophomore	27	67.5%		
Number of students	40	100%		

Table 2 also displays the voices of the nursing students about how they viewed the cognitive engagement aspect of language learning strategies for speaking.

Table 2. Responses of the students towards language learning strategies

			Students' Responses			
No	Dimension	Statements	Strongly Disagree	Disagree	Agree	Strongly Agree
	Memory Strategies	I use rhymes to remember new English words.	7.5%	20%	70 %	2.5%
		I try to translate Indonesian sentences into English sentences and produce them orally.	2.5%	5%	77.5%	15%
		I tape record the sentences I produce.	-	32.5%	60%	7.5%
		I try to remember new English words by pronouncing them.	-	7.5%	77.%	15%
2	Cognitive Strategies	I try to speak with myself to improve my speaking	-	5%	67.5%	27.5%
	-	I prepare a topic or grammatical rules in speaking practice.	2.5%	22.5%	70%	5%
		I try to learn a new pattern by making a sentence orally.	2.5%	10%	77.5%	10%
		I try to remember what the English word equivalent to Indonesian word is.	-	10%	82.5%	7.5%
3	Compensation Strategies	I practice guessing the speaker's meaning based on what they have said so far.	-	10%	75%	15%
		I mix Indonesian words and English words if I do not know the English words.	-	12.5%	70%	17.5%
		If I cannot think during a conversation in English, use gestures.	-	22.5%	67.5%	10%
		I practice catching the speaker's main point.	-	7.5%	85%	7.5%

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4 Metacognitive Strategies	Metacognitive Strategies	I speak a word or a sentence several times to remember it.	-	7.5%	70%	22.5%
		I try to correct my mistakes that I produce orally.	-	5%	80%	15%
		I try to evaluate my utterances after speaking	2.5%	7.5%	75%	15%
		I notice my English mistakes, and use that information to help me do better.	-	10%	75%	15%
		I pay attention to pronunciation to pronounce better.	-	7.5%	70%	22.5%
		I revise words and grammar forms that I had difficulty remembering.	-	7.5%	82.5%	10%
		I pay attention to similarities and differences between English and my first language.	-	20%	70%	10%
		I put words into rules that I know in speaking.	2.5%	12.5%	77.5%	7.5%
		Before I respond orally to questions, I write out the answers.	-	20%	75%	5%
	Affective Strategies	Encourage myself to try to speak	-	5%	72.5%	22.5%
	-	While speaking, I practice relaxing when I feel anxious	2.5%	17.5%	70%	10%
		I ask questions in English	2.5%	37.5%	55%	5%
		While speaking, I think of what I want to say in my first language and then put it in English	2.5%	7.5%	82.5%	7.5%
	Social Strategies	I ask somebody to correct me when I talk.	-	12.5%	70%	17.5%
	J	I practice speaking with my friends or my teachers.	-	10%	82.5%	7.5%
		I practice English with native speakers.	7.5%	35%	50%	7.5%
		I practice asking the speaker's to clarify what they said.	-	7.5%	80%	12.5
		I practice ways to check whether the listener understood what I said.	-	10%	80%	10%

Table 2 lists the questionnaire responses from 40 nursing students. Such comments were studied by categorizing them in the debate based on the degree of speaking language acquisition tactics. Developing a predictive model for nursing students' language learning strategies for speaking ranged from responses that changed throughout online learning based on personal perceptions or experiences.

The information reveals nursing students' language learning behaviors for speaking, including their involvement in internal processes such as acquiring speaking methods, preparation, gaining confidence, self-control, and the capacity to talk without hesitation. The experience statements from the nursing students were categorized as "Strongly Disagree," "Disagree," "Agree," and "Strongly Agree" in the language learning strategies for speaking questionnaire. The nursing students' participation in the language learning strategies for the speaking and answering phase received favorable feedback.

Respondents were given an open-ended question to explore their thoughts and improve the study's findings regarding speaking language learning practices (Noom-Ura, 2013). It pertains to the nursing students' individual experiences or perspectives, which could result in a critical evaluation of their beliefs. The issue of how nursing students approach language learning techniques for speaking activities, such as preparation and pursuing subject-relevant knowledge, arises. The following examples from interviews with nursing students highlight these feelings and experiences.

Table 3. Excerpt 1

- R1 I tried to *write down* the new words I see or heard to *memorize* it.
- R2 I put essential *notes* on my bedroom door, so I can *memorize* them every time I pass the door.
- R3 I use google translate to help me *memorize the sound* of the new words I have learned.

Table 4. Excerpt 2

- R1 Before the class start, I opened my *dictionary to find the new English words* we will be study about.
- R2 I *prepare a topic or grammatical rules* in speaking practice.
- R3 I try to *remember what the English word* equivalent to Indonesian word is.

Table 5. Excerpt 3

- R1 If I *misspelled the English words I will immediately write down* and revise it.
- R2 I like to **write my English book with colours** because it helps me to memorize and not make any mistakes.
- R3 When I was in high school, I **set a goal to memorize 20 grammars a day** by write in my study book.

Table 6. Excerpt 4

- R1 I always try to *repeat the English words to myself because it helps me to do better* for tomorrow's English subject.
- R2 In college, *I realize I can learn English more efficiently* by watching English movies.
- R3 I **notice my English mistakes**, and use that information to help me do better.

Table 7. Excerpt 5

- R1 I like talking to myself in front of the mirror not just to *improve my pronunciation but also to build up my confidence*.
- R2 I ask my chair-mate to *correct my mistake while speaking English because she helps me a lot and I feel encouraged* by her.
- R3 When I was in primary school, every time I got A in English test my mother would **buy me a cotton candy as a reward**.

Table 8. Excerpt 6

- R1 I **got told that communicating in English** makes it easier for me as an upcoming nurse to have a job locally or internationally
- R2 I **asked my English tutor** if they can help me practice to improve my English by sending me a native speaker.
- R3 I practice ways to check whether *the listener understood what I said*.

The examination of the data revealed that the nursing students had a strong desire to practice speaking or communicating in English. They have learned how to talk more clearly and appreciate their shared knowledge. Additionally, students will have a thorough understanding of how confidence is built. They have been experimenting, picking up, recalling, preparing, and solving problems. Additionally, they promote speaking techniques for language learning so that students can connect what they should learn to their prior knowledge and experience. They began comprehending how they may participate more actively in their educational processes.

Discussion

The gathered data from the questionnaire and interview show that nursing students made an effort to learn English by realizing the opportunities that might arise and how they might aid them in speaking with patients in the future. They did this by doing something they enjoyed and progressed day by day. As a result, it may be concluded from the studies by O'Malley et al. (1985) that effective learners combine many learning techniques. In addition, high-performing students used tactics in varied ways in addition to using more of them. By this, Henry (2014) contends that successful language learners are typically those who know how to manipulate learning strategies in their day-to-day encounters with the language.

The data lead us to conclude that nursing students struggle significantly due to the switch from traditional to online education. It irritated them and slowed their learning. Nursing students should work harder to comprehend these new English words because English is widely utilized in the medical industry and virtually everything is read and pronounced in English. We were mistaken entirely about our assumption that they had not advanced during the epidemic season because they had been trying, learning, and honing their skills at home, as seen by their responses to our questionnaire.

They responded to our questionnaire with responses we would never have considered. They experimented with various methods to learn English, including asking their friends and family to correct their pronunciation on social media or studying how to speak the language by watching English movies or listening to English songs. They worked so hard to be able to communicate in English. Although they did not do it well, they tried to comprehend what the native speakers were saying.

The previous studies were by Marlin et al. (2021) that the majority of findings revealed that students primarily use metacognitive strategies to learn the language learning process and seeks practice opportunities to enhance speaking ability during online learning. There are two kinds of metacognitive strategies employed by female and male students were centering the learning process and arranging and planning strategies. Both strategies involved paying attention when people speak English on film, YouTube, or podcast, looking for friends to talk to in English by chatting or call, and finding out how to be a better learner of the English word through references on the internet (Atmowardoyo & Sakkir, 2021; Saehu & Yundayani, 2021). In other words, the students to be more active in organizing English learning and setting goals for the target language to refine speaking ability. In the cognitive strategies, students' majority used practicing and receiving, and sending messages strategies to act in the highest English learning skills and highest motivation to improve their English-speaking skills. These strategies were implemented by repeating the speaker naturalistically, such as watching Hollywood movies, English TV shows, or English comedians, looking for new comments in English learning, and receiving and sending what they hear or see of the language information. The available language learning strategies with digital application attempt to always provide higher motivation and confidence to the students to reduce anxiety, hesitate, and learn vocabulary, pronunciation, fluency, grammar, or speaking like a native English speaker during online learning (Saehu & Yundayani, 2021).

CONCLUSION

All of the responses were compiled, and the language learning strategies were then split into six categories: memory strategies, cognitive methods, compensatory strategies, metacognitive strategies, affective strategies, and social strategies. Furthermore, after putting all the responses into the various categories, we concluded that while the nursing students are improving, they still need to practice having in-person conversations to develop their chemistry, connection, and understanding. The nursing students' experience transitioning from offline to online has been mixed. On the one hand, they may feel more private and secure studying at home alone and practicing speaking to themselves in front of a mirror, which is a positive development. However, on the other hand, they still need a partner, a natural person they can talk to, confidence-building exercises, and preparation for situations before they arise. Therefore, the influence of a good teacher and a healthy environment may increase their intelligence, confidence, and courage to communicate in English and enhance their communication skills.

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